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Roosevelt Memorial Issue

The Southern PATRIOT

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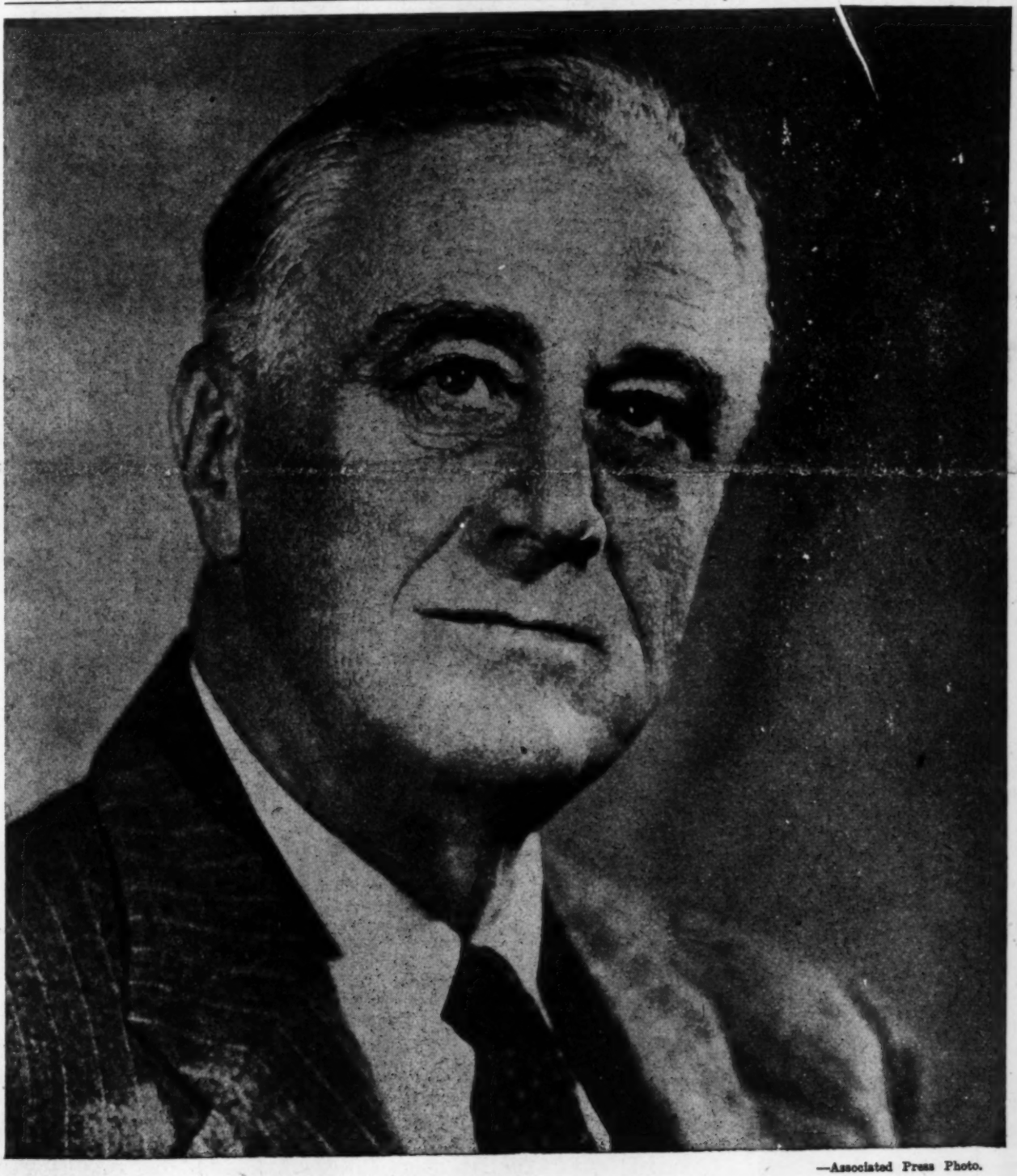

—Associated Press Photo.

WHAT FRANKLIN D. ROOSEVELT

Hon. Claude Pepper

United States Senator

The south in the death of President Franklin D. Roosevelt has lost its best friend. This good and great man loved the south and sought in every possible way to help the south.

The President understood the south, its problems, its peculiar background and its great virtues. He knew and appreciated the intense fires of patriotism which ever burn in the hearts of southern people. He was grateful for the response of southern leaders and southern people to his martial call against an evil enemy.

The President dreamed of the day when the south might be free of northern economic domination, when it might own its own great resources and develop them.

The President dreamed of the day when all the southern boys and girls might have a good education and all of our people have access to the means of health. The President felt, I am sure, that the south ought to believe as did its great and early leaders, Jefferson and Jackson, in truly liberal and progressive democracy and he wanted to see the modern leaders of the south speak the true sentiments of Jefferson and Jackson.

As we love and honor the President and his memory, let us covenant one with another that we shall continue to fight our south's battles as did the south's now silent friend, our lamented late President Franklin D. Roosevelt.

J. Louis Reynolds

Vice-President, Reynolds Metals Company

The Washington of the world is dead. What the father of our country did for our own nation, crushed and oppressed, Franklin Delano Roosevelt sought to do for the world.

His life was dedicated to the fight against all paralyses, of body, of mind, of business, and finally against the paralysis of war. He had fallen many times, but always he knew he would stand again, just as he knew the afflicted peoples of the world would stand again. His faith and determination drove his spirit into the downtrodden people of the world, people defeated and weary of battle, and made them stand again.

The lame and halting were his friends, no matter what their color or creed. He gave his faith and his life to making them whole again, to giving them peace, a peace that would not tear their hearts or their bodies. Peace and freedom for every man in the world was his creed. Just as Washington led our nation against oppression, Roosevelt gathered together the remnants of a crippled world and ordered them to march. His order stands. It falls to us to hold the reins, and from a new nation, founded on his four freedoms, build a new world.

George S. Mitchell

Southeastern Director,
CIO Political Action Committee

A member of UAW with whom I was talking the afternoon the news came in said, "He fed me when I could not feed myself."

Through President Roosevelt the Federal Government accepted responsibility for human needs. The President himself had confidence in the self respect of American citizens and in their ability, when given a lead, to build back a great industrial and agricultural society. In all the processes of administration, his weight was felt in behalf of the principle that federal dollars must be spent with even justice between black men and white. The foresight and determination of his war against reaction abroad encourage the poor of the south, who work to realize democracy here.

Aubrey Williams

National Farmers Union

The south has lost a great friend. In the death of President Roosevelt the south lost an understanding and powerful advocate. For Franklin Delano Roosevelt loved the south. He loved its people, and he liked its climate, its trees, its land. He would sit by the window on his many journeys through the south and watch the countryside for long periods, enjoying its beauty, thinking of its people, and undoubtedly dreaming of its future.

In terms of the long years that lie ahead for the south, as it seeks to rebuild its soil, mined of its fertility by ruthless landlords; as it seeks to rebuild its induistry, sold out to abenteen owners by politicians unfaithful to their people back home; as it seeks to rebuild the human erosion drained out through the years of "ill housed, ill fed and ill clothed" living for the benefit of the two percent who rule it politically and economically:—in terms of these tasks, probably the most significant thing about the relationship of Franklin D. Roosevelt and the South was the deep kinship which came to exist between its people and this man. They responded to his dreams of a sturdy, expanding democracy. They warmed to his love of the elements, the soil, the forests, the rivers, the cattle and the crops and the mill and the store. This response to this man may hold the hope of the future of the people of the south.

Jennings Perry

Editor, Nashville Tennessean

Franklin Roosevelt did what he could to repair the condition of the ill-fed, the ill-clothed, the ill-housed. Because proportionately the south had more of these than any other section, the President's program thus had wider meaning in the south than elsewhere, touched more lives and gave more hope. Roosevelt gave the south, in the TVA, the means not only of building industrial diversity but of raising the general standard of living through the use of cheap electric power in urban and rural homes. And because Roosevelt resurrected from disuse and pretense the principles and practices of true democracy his example stirred throughout the south an emulation which will continue until the knotty and ancient evils of prejudice and racial conceits yield at last to the realization that all men here are free men, holding an inseverable RIGHT to share in the government and the opportunities of living and service the nation offers its citizens.

Roscoe Dunjee

Publisher, Black Dispatch

Southerners more than any other Americans will miss the wise and sincere guidance the late President Roosevelt gave to the American way of life. His passing may temporarily halt progress being made in the realm of social betterment, but nothing can stop the wave of liberalism to which he gave birth in America and the world.

Unquestionably America is a better and more decent place in which to live because of Roosevent's bold espousal of ideal society where every citizen has legal equality and economic opportunity. I am sure his ultimate goal was to achieve the virile morality of the Russians where racial discrimination, under the Russian Constitution, is defined as a crime.

The late President sponsored the survey covering economic conditions in the south, which did more to open Dixie's eyes to its own shortcomings than any previously published document. In him we had a president who never set his sails to catch the passing breeze. Resolutely he faced his traducers to the end. He never fought his battles in retreat.

MEANT TO THE SOUTH . . .

David E. Lilienthal

Chairman, Tennessee Valley Authority

Franklin Roosevent showed so clearly that he realized—as too few contemporary American statesmen realize—that the great southern regions possessed talent and resources matched only by the pride of a great people.

It was in the spirit of that conviction that President Roosevelt joined with Senator Norris and his supporting colleagues in settling the Muscle Shoals controversy through the creation of the TVA. The president and congress thus forged a great tool, an instrument for the development of the resources of the south, and placed it in the hands of the people. It was an act of faith in the methods of democracy. It was an act of faith in the talents and strength of the south. With this tool—this new kind of government agency—the rivers, the rainfall, the fertility of the soil, the forests and the minerals are more and more being put to work for the people.

That was what the president so eloquently said he wanted accomplished—a more fruitful, more productive southland and thereby a stronger, more productive nation.

Homer P. Rainey

Ex-President, University of Texas

President Roosevelt seemed to have had a special and peculiar interest in the south and its problems. Much of his social legislation for the improvement of the welfare of the nation was aimed toward the south.

His interest in the underprivileged people of the south was one of the major factors in his administration, and in his efforts in their behalf he brought new hope and inspiration to millions of our people who were badly oppressed and discouraged. His material contributions to the south were impressive and significant, but in my judgment his greatest contribution to the south was the fact that he awakened us in the south to a new realization of ourselves, of our problems and needs, and of our potentialities for self-improvement. He has aroused within us a new self consciousness and a new determination to get the maximum benefits of our unparalleled storehouse of national resources and to go forward toward the fulfillment of our dreams of a genuine democracy in the south for all our people.

Nelson P. Poynter

Editor, St. Petersburg, Fla., Times

The death of no man in history has brought so many tears as that of Franklin Roosevelt.

The radio enabled him to project his warmth and friendship to millions of fellow citizens throughout the world. They knew him and loved him and will mourn him as a personal friend.

He came to power by vote of the people when other world leaders were seizing power by force. We the people of the United States reinvested him with this power in 1936, in 1940 and in 1944 with complete confidence that he would not abuse this power. He was a great democrat and we spell it with a little "d" meaning that he had faith in the people, the principle of self-government. He exercised great democratic leadership in standing up to the dictators. In a time when timid men said that what this country needed was a dictator Franklin Roosevelt expressed his faith in the people, in the idea of self-government. And he said during the 1944 campaign, we needed not less democracy, but more democracy to defeat the totalitarian idea.

Franklin D. Roosevelt is retiring this week to his beloved acres at Hyde Park, New York, on the Hudson River. He has been a great and good servant for us. His retirement places greater responsibilities on us to prove that no man is indispensible, to the idea that we the people are capable of ruling ourselves through the democratic mechanism.

Virginius Dabney

Editor, Richmond Times-Dispatch

The South is a better place, and all its people have a fuller life, because Franklin D. Roosevelt lived. No other president of modern times devoted an even remotely comparable amount of thought and effort to southern problems, and he alone among them had the vision, the imagination and the courage to initiate a broad program addressed to the economic and social ills of the region.

The legislation which he sponsored during his twelve years in the White House opened wider horizons to the southern masses. The poor, the dispossessed and the underprivileged of both races found in him a friend and protector. Like all human beings, he made mistakes, but his overall program for both the south and the nation was sound. He will live, and especially in the hearts of southerners, as one of our truly great presidents.

Mrs. Virginia Durr

National Committee to Abolish the Poll Tax

The greatest memorial we can build for President Roosevelt is to erect a structure for everlasting peace at the San Francisco Conference. His name will live in glory for his great deeds. He fought against fascism and for humanity. He loved the people and that meant all the people. He tried to give equal opportunity to all and especially did he try to give new opportunity to the south.

Let us remember him with love and gratitude. Let us remember his friends. Let us give our support and faith to President Truman as he tries to carry out this great tradition.

Harry W. Acreman

Executive Secretary, Texas State Federation of Labor

The late President exemplified, as has no other leader in history, the spirit of unity and democracy necessary to a united country. He opposed, by act and implication, the theory that the ordinary citizen of the South is a lesser individual and entitled to less consideration than his northern counterpart. In the face of the opposition of the Southern congressional reactionary bloc, he has pointed our feet in the right direction, to the end that all citizens of this great country are entitled to equally high economic standards and opportunities, and that intolerance and sectionalism have no place in American life. . . The nation could erect no finer memorial to a great leader than to insure economic justice to the South and to all workers of our nation.

F. D. Patterson

President, Tuskegee Institute

Under the Roosevelt administration millions of people came to understand their true work as human beings and their responsibility and opportunity as American citizens. To the Negro people to whom full citizenship had not been extended, he left no doubt of his interest and desire to see them integrated fully into our national life.

President Roosevelt's loss is therefore greatly and deeply felt among this group. With them there is important concern that those ideals of justice, opportunity and fair play for all Americans shall be kept to the fore in the thinking of the American people for his sake.

Today, America, under the leadership of President Truman must not relax one moment in the execution of his ideals for world progress. This is our destiny. In no other way may we discharge fully the sacred trust imposed by one who has joined the world's illustrious dead.

"My Friends . . ."

Selections from the Addresses of Franklin D. Roosevelt

"Economic Problem No. 1"

My intimate interest in all that concerns the South is, I believe known to all of you; but this interest is far more than a sentimental attachment born of a considerable residence in your section and of close personal friendship for so many of your people. It proceeds even more from my feeling of responsibility toward the whole Nation. It is my conviction that the South presents right now the Nation's No. 1 economic problem—the Nation's problem, not merely the South's. For we have an economic unbalance in the Nation as a whole, due to this very condition of the South.

It is an unbalance that can and must be righted, for the sake of the South and of the Nation.

—From a letter to the Members of the Conference on Economic Conditions in the South.

"There is Little Difference Between the Feudal System and the Fascist System"

I speak to you of conditions in this, my other State. The buying power of the people of Georgia and of the people of many other States is still so low today that the people of these states cannot purchase the products of industry. Therefore, industry itself is cut off from an outlet it otherwise would have. People cannot buy at stores unless they have cash or good credit. Stores cannot fill their shelves unless they have customers.

Mills and factories cannot sell to stores who have no customers.

I speak not only of the workers in the bottom third of our population—millions of them who cannot afford a suit of clothes. I speak also of millions of other workers who are so under-employed and so underpaid that the burden of their poverty affects the little business man and the big business man and the millionaire himself.

Georgia and the lower South may just as well face facts—simple facts presented in the lower South by the President of the United States. The purchasing power of the millions of Americans in this whole area is far too low. Most men and women who work for wages in this whole area get wages which are far too low. On the present scale of wages and therefore on the present scale of buying power, the South cannot and will not succeed in establishing successful new industries. Efficiency in operating industries goes hand-in-hand with good pay and the industries of the South cannot compete with industries in other parts of the country, the North, the Middle West and the Far West, unless the buying power of the South makes possible the highest kind of efficiency.

And let us well remember that buying power means many other kinds of better things—better schools, better health, better hospitals, better highways. These things will not come to us in the South if we oppose progress—if we believe in our hearts that the feudal system is still the best system.

When you come down to it, there is little difference between the feudal system and the Fascist system. If you believe in the one, you lean to the other.

With the overwhelming majority
feudalism. So do many among those
in life belong to the most prosperou
and women in the professions, the
storekeepers, a growing number of
are coming more and more to see th
system calls for the elimination of
of the whole truth, and participatio
bottom of the ladder, as well as tho

**One thing is certain—we are not
going forward to better days. We
the line, and the cooperation is incre
are coming to understand that abus
cessfully eradicated are not going t**

—From a speech in

"Elect Men Who Will and Fight Day and Ni

The report to which I referred (
ditions in the South) is a synopsis—
social problems of the Southland. I
be taken to solve the problems.

Some of these steps, it is true,
but you will readily realize that act
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immediate, would be wholly inadequ
is that most of these problems invol
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all of these states and the rest of th

It is not an attack on state sovere
aspect of all these problems requi
ment in Washington.

Such action by the Congress, it
supported by the Senators and Rep
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Senators and Congressmen who are n
these needs cannot be expected to gi

**Translating that into more intima
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United States, they must send to tha
tatives who are willing to stand up a
statutes drawn to meet actual needs-
to gloss over the evils of the moment
teeth in them which go to the root
inequalities, raise the standards, and,
improvement to the conditions of hu**

—From an address at B

"The Right To Vo

"The right to vote must be open
color or creed—without tax or artif
sooner we get to that basis of politica
the country as a whole."

jority of the people of this State, I oppose those who by virtue of their circumstances perous 5 per cent of the population. Men , the overwhelming majority of the small er of the bankers and business men—they see that the continuation of the American on of special privilege, the dissemination ipation in prosperity by the people at the s those in the middle and at the top.

re not going back to the old days. We are We are calling for cooperation all along s increasing because more and more people abuses of the past which have been suc- oing to be restored.

ech in Gainesville, Ga., March 23, 1938.

Will Stand Up l Night"

red (President's Report on Economic Con- opsis—a clear listing of the economic and nd. It suggests the many steps that must

true, can be taken by state governments, at action by the state alone, even if such ghboring states could be simultaneous and adequate. The very good reason for this involve interstate relationships, relation- s of this region but also between each and of the Nation.

sovereignty to point out that this national requires action by the Federal Govern-

ss, it is equally clear, must be vigorously d Representatives whose constituents are ern economics and Southern social needs. o are not wholeheartedly in sympathy with l to give them vigorous support.

intimate terms, it means that if the peo- ant definite action in the Congress of the to that Congress Senators and Represen- d up and fight night and day for Federal needs—not something that serves merely noment for the time being—but laws with root of the problems; which remove the , and, over a period of years, give constant of human life in this State.

s at Barnesville, Ga., August 11, 1938.

o Vote Must Be Open"

open to all citizens, irrespective of race, r artificial restriction of any kind. The political equality, the better it will be for

"Maintain That March and Accelerate Its Pace"

In my earlier years here I saw a South in the larger sense forgotten, forgotten in the midst of an unhealthy national speculation—a boom era which thought in terms of paper profits instead of human lives. And for those days what has the South to show today? A few great fortunes perhaps, but most of the profits went North.

Then came the tragic years of the depression: closed banks in almost every community, ruinous crop prices, idle mills, no money for schools or roads—a picture of despair—I knew Georgia of those days, too.

Yet, through all those years the South was building a new school of thought—a group principally recruited from younger men and women who understood that the economy of the South was vitally and inexorably linked with that of the Nation, and that the national good was equally dependent on the improvement of the welfare of the South. They began asking searching questions: Why is our pay, in other words, our earning capacity so low? Why are our roads so bad? Why are our sanitation and our medical care so neglected? Why are our teachers so inadequately paid? Why are our local school buildings and equipment so antiquated?

It may not be politic but it is good American idealism to recognize, to state boldly that in 1932, six short years ago, the conditions of human life in Georgia and in other states of the lower South were as a whole at the bottom of the national scale. At the same time let us rejoice and take pride in the undoubted fact that in these past six years the South has made greater economic and social progress up the scale than at any other period in her long history. It is my objective and yours to maintain that march and to accelerate its pace.

—From an address at the University of Georgia, August 11, 1938.

"No Forgotten Races"

As far as it was humanly possible, the government has followed the policy that among American citizens there should be no forgotten men and no forgotten races. It is a wise and truly American policy. We shall continue faithfully to observe it.

—From an address at Howard University, October 26, 1936.

For the American people are resolved that when our men and women return home from this war they shall come back to the best possible place on the face of the earth; they shall come back to a place where all persons, regardless of race or color or creed or place of birth, can live in peace and honor and human dignity—free to speak, free to pray as they wish—free from want and free from fear.

—From an address at Chicago, October 28, 1944.

"The South is Learning"

I think the South is going to remain Democratic, but I think it is going to be a more intelligent form of democracy than has kept the South, for other reasons, in the Democratic column all these years. It will be intelligent thinking; and, in my judgment, because the South is learning, it is going to be a liberal democracy.

—From a Press Conference, April 20, 1938.

Franklin D. Roosevelt

He Loved and Worked for the South . . .

Franklin Roosevelt always liked to call his home in Warm Springs, the "Little White House", and the South his "other home". But this interest in the people of the South was more than a sentimental attachment. **He was especially interested in Southern problems because he knew that the solution of the economic difficulties of the Nation demanded the solution to the problems of the South.**

And the record of solid achievement toward that end accumulated in his twelve years of administration is eloquent testimony of his love for the South.

In 1937, the President called together a group of outstanding Southerners, and asked them to prepare a statement "of the economic conditions of the South, a picture of the South in relation to the rest of the country, in order that we may do something about it; in order that we may not only carry forward the work that has begun toward the rehabilitation of the South, but that the program of such work may be expanded. . . ." From this Conference on Economic Conditions in the South came the well-known "President's Report". This recitation of simple facts on the South's economic resources, population, income, education, health, housing, credit and purchasing power startled the sleepy South and nation, and evoked a powerful awakened public opinion, ready for action.

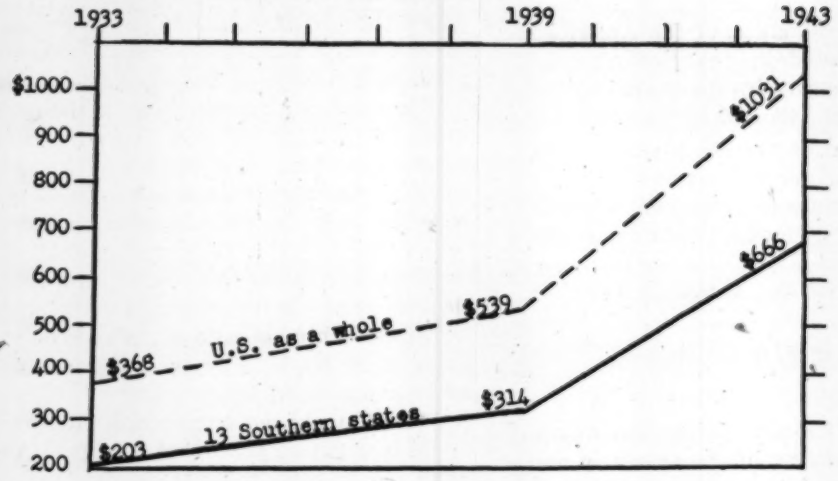
A similar report prepared today would register untold changes in the face of the South, most of them as a result of the President's forthright policies and legislation.

All these changes are reflected in the unparalleled rise of Southern per capita income, a boost of 228% from 1933 to 1943. According to the Survey of Current Business, the Southeast's income rose far quicker than that of any other section in the country. This region, with income payments in 1939 only 3% below 1929, made a quicker recovery than any other area to the pre-depression level; and since 1939, the South's per capita income has continued to rise faster than the rest of the nation.

This wave of higher living standards throughout the South is the direct result of New Deal measures, especially the Wage-Hour Bill setting first a 30c an hour minimum, and later a 40c minimum; the National Labor Relations Act, which permitted the growth of labor unions; and the farm measures of the New Deal, especially the A.A.A. and Farm Security Administration.

The President realized from the outset that purchasing power in the hands of the Southern people was the key to the solution of every Southern problem. In a speech before the University of Georgia, he pointed out that "social conditions — schools and hospitals, medical care and better sanitation, clothing and housing and food, all those other things that we call by the general name of better social conditions — were intimately dependent on economic conditions: higher wages, higher farm income and more profits for small businessmen. . . ."

Per Capita Income Rise During Roosevelt Administration



And as purchasing power rose, so were these social conditions improved. Today the south is dotted with new schools and hospitals, new homes, new parks and recreational centers—all built through federal aid under the New Deal.

Perhaps the greatest monument to the President's administration is the Tennessee Valley Authority. The President always pointed out in discussing the TVA, that it was not intended merely as a source of electric power, but as a social experiment in building a new abundant life for the people of the Valley. TVA is no longer an experiment; it has proved its worth over and over; and much credit for its birth and growth goes to Franklin Roosevelt.

Other New Deal legislation had especial significance for the South. The Social Security Act aided and protected Southerners particularly, because America's neediest are in the South. The Rural Electrification program brought power and light to a larger proportion of Southern homes.

And finally, the Roosevelt Administration began a New Deal to the South's Negro population. Economic opportunities were opened for the first time, through the creation of the Fair Employment Practices Committee—with results beneficial to all Southerners. And the President's own deep feeling for justice and fair play reached out to influence his subordinates, who administered federal programs in the South far more fairly than ever before.

Furthermore, the President helped and encouraged the South in its battles against the unfair freight differential and the onerous poll tax; corrections to both these evils were high on the agenda for Fourth Term action.

The Southern PATRIOT

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THE SOUTHERN CONFERENCE FOR HUMAN WELFARE

CLARK FOREMAN
President

JAMES A. DOMBROWSKI
Executive Secretary and Editor

He Charted Its Future . . .

The South's best friend is with us no more; yet Franklin Delano Roosevelt has set our course for the future. Under his leadership, we have come to see that a better South, a happier South lies down the road of industrialization; with Roosevelt at the wheel we began that journey; as a result of his able guidance, we are now prepared to go boldly forward.

Why did the President feel so deeply that the South needed industrial development? First, of course, because the growth of industry meant jobs, new money and purchasing power, and higher living standards. Second, because industrialization brings with it the necessity for higher standards of education, of health and of democracy.

The growth of industry in the South during the past few years proves this to be true. The rise in per capita income, the best index of purchasing power, from $203 in 1933 to $666 in 1943, indicates the effect of industrialization; as do the notable strides toward wider social and political democracy. But we are just beginning. In 1943, the South's per capita income was little more than half the per capita income of the nation.

What is required to make possible our further industrialization?

First, and foremost, stable world conditions, that will make possible extensive trade, and a market for the products of Southern manufacture.

Next, we need capital in the hands of Southern businessmen. The Federal Loan Agency, established under Mr. Roosevelt's administration, is ready to assist. Natural resources we have in abundance. Labor after the war will be plentiful. We need cooperation and planning of the entire community—especially between labor and business—cooperation which can be easily achieved and can work miracles.

The major obstacle, freight rate discrimination, is being fought in the courts, and should soon be cleared away.

The South must be ready to keep its new industry rolling, and expanding, to assure full employment.

We must adopt as our aim the Economic Bill of Rights proclaimed by our late President:

"The right to a useful and remunerative job in the industries, or shops or farms or mines of the nation;

The right of every farmer to raise and sell his products at a return that will give him and his family a decent living;

The right of every business man, large and small, to trade in an atmosphere of freedom from unfair competition and domination by monopolies at home or abroad;

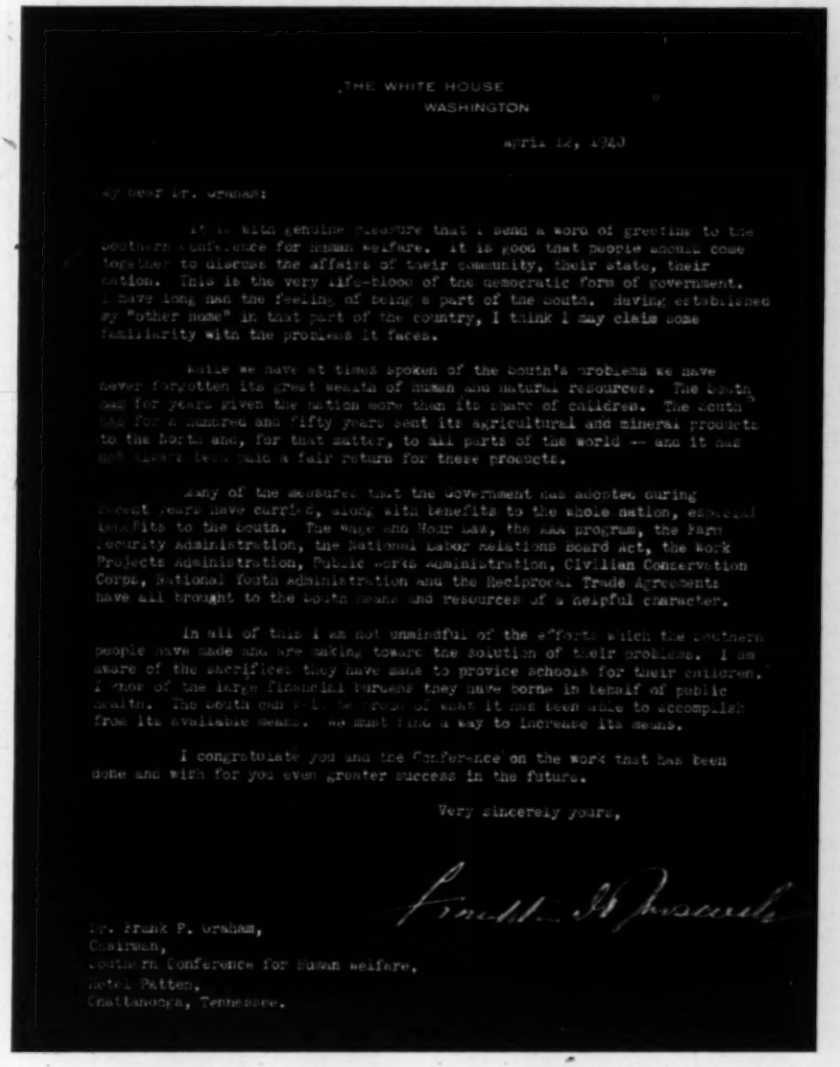
The right of every family to a decent home;

The right to adequate medical care and the opportunity to achieve and enjoy good health;

The right to adequate protection from the economic fears of old age, sickness, accident and unemployment;

The right to a good education."

On this path set so clearly by Franklin Roosevelt we must advance. We are indeed fortunate that into his position steps President Harry S. Truman, who has demonstrated his loyalty and faith in the program of Franklin Roosevelt. We offer him all our support in his task of achieving victory in the war, a lasting peace, and success in his "efforts to improve the lot of the common people".



THE WHITE HOUSE
WASHINGTON

April 14, 1943

My dear Dr. Graham:

It is with genuine pleasure that I send a word of greeting to the Southern Conference for Human Welfare. It is good that people should come together to discuss the affairs of their community, their state, their nation. This is the very life-blood of the democratic form of government. I have long had the feeling of being a part of the South. Having established my "other home" in that part of the country, I think I may claim some familiarity with the problems it faces.

While we have at times spoken of the South's problems we have never forgotten its great wealth of human and natural resources. The South has for years given the nation more than its share of children. The South has for a hundred and fifty years sent its agricultural and mineral products to the North and, for that matter, to all parts of the world -- and it has not always been paid a fair return for these products.

Many of the measures that the Government has adopted during recent years have carried, along with benefits to the whole nation, especial benefits to the South. The Wage and Hour Law, the AAA program, the Farm Security Administration, the National Labor Relations Board Act, the Work Projects Administration, Public Works Administration, Civilian Conservation Corps, National Youth Administration and the Reciprocal Trade Agreements have all brought to the South means and resources of a helpful character.

In all of this I am not unmindful of the efforts which the Southern people have made and are making toward the solution of their problems. I am aware of the sacrifices they have made to provide schools for their children. I know of the large financial burdens they have borne in behalf of public health. The South can well be proud of what it has been able to accomplish from its available means. We must find a way to increase its means.

I congratulate you and the Conference on the work that has been done and wish for you even greater success in the future.

Very sincerely yours,

Franklin D. Roosevelt

Dr. Frank P. Graham,
Chairman,
Southern Conference for Human Welfare,
Hotel Patten,
Chattanooga, Tennessee.

SOUTHERN CONFERENCE FOR HUMAN WELFARE
PRESBYTERIAN BUILDING
NASHVILLE 3, TENNESSEE

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☐ Enroll me as a member of the Southern Conference for Human Welfare; I enclose $2 ($1 of which is for a year's subscription to THE SOUTHERN PATRIOT.)

NAME _____

ADDRESS _____

_____ SP4

The Peace He Planned, We Must Build . . .

Perhaps the deepest tragedy of President Roosevelt's death was that he was unable to complete the moulding of "a permanent structure of peace, upon which we can begin to build under God, that better world in which our children and grandchildren—yours and mine, the children and grandchildren of the whole world—must live."

The people of the world have always wanted peace. And closest to Franklin Roosevelt's heart was the building of a world in which all men and all nations might live in peace and in security. His leadership and genius laid the essential foundation of unity and friendship among the world's great nations.

South's Future at Stake

That those bonds of unity and friendship shall be strengthened is the hope of all the world. But we in the South hope even more fervently—for the future development of our region in every field depends upon the realization of a durable peace.

The South knows that industrialization is the answer to the problems of the South—not only its economic problems but its political and social difficulties as well. And industrialization of the South is possibly only in a stable world, a world of peaceful relations among nations. For the South must depend on large foreign markets to sell its products.

For this reason, the Southern states have a long tradition of internationalism. Today this tradition must be given new life, new spirit. For the peace we must have will not come to us gratis after victory is achieved. The doubters and the defeatists already are loudly heard. And now that the architect of the peace is with us no more, on each of our shoulders heavier responsibilities fall, to realize and build the edifice designed by President Roosevelt. What were his plans—

First, "to complete the organization of the United Nations without delay and before hostilities actually cease". Upon the meeting in San Francisco falls the responsibility for bringing to life the "universal organization in which all peace-loving nations will finally have a chance to join". But upon us falls the responsibility to understand the Dumbarton Oaks plans, to give support to our delegates in San Francisco, and to help steer these proposals successfully through the Senate of the United States.

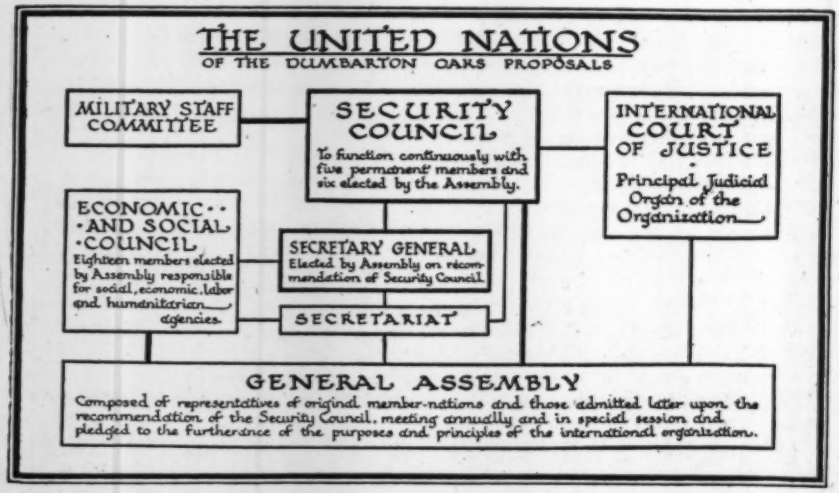
Second, "for the United States to take the lead in establishing the principle of economic cooperation as the foundation for expanded world trade." Toward this end, we must aid in creating a public understanding of the Bretton Woods agreements, which will overwhelm the attacks of selfish-minded banking interests.

No Middle Ground

In his report to Congress, March 1, President Roosevelt pointed to the path ahead for all mankind:

"The conference in Crimea was a turning point, I hope, in our history, and therefore, in the history of the world. It will soon be presented to the Senate and the American people, a great decision which will determine the fate of the United States, and I think therefore of the world, for generations to come.

"There can be no middle ground here. We shall have to take the responsibility for world collaboration, or we shall have to bear the responsibility for another world conflict."


THE UNITED NATIONS
OF THE DUMBARTON OAKS PROPOSALS
MILITARY STAFF COMMITTEE
SECURITY COUNCIL
To function continuously with five permanent members and six elected by the Assembly.
INTERNATIONAL COURT OF JUSTICE
Principal Judicial Organ of the Organization
ECONOMIC AND SOCIAL COUNCIL
Eighteen members elected by Assembly responsible for social, economic, labor and humanitarian agencies.
SECRETARY GENERAL
Elected by Assembly on recommendation of Security Council.
SECRETARIAT
GENERAL ASSEMBLY
Composed of representatives of original member-nations and those admitted later upon the recommendation of the Security Council, meeting annually and in special session and pledged to the furtherance of the purposes and principles of the international organization.

South Looks To San Francisco

By RALPH BUNCHE
U. S. State Department

The South has a vital stake in the success of the forthcoming United Nations Conference at San Francisco. This Conference will convene on April 25 with the single purpose of reaching agreement among the United Nations on a Charter for the proposed new world organization. The new organization will provide machinery for collective security with a view to stopping wars before they can set the world afire, and, by long-range international cooperation, eliminating the causes of wars.

Dumbarton Oaks was a first and exploratory, but highly encouraging step in this direction.

The South has many problems which will require solution in the years to come. But it can only be in a world secure from war and the threat of war, a world which can look forward to years of peace, development, progress in science, industry, education, and human interrelationships, that the South can hope to work out its problem and secure for itself a prosperous and tranquil future.

It is of especial interest to those working on the problems of the South that Chapter IX of the Dumbarton Oaks Proposals sets forth arrangements for international economic and social cooperation looking toward "the creation of conditions of stability and well-being which are necessary for peaceful and friendly relations among nations" and charges the organization with responsibility to facilitate "solutions of international economic, social and other humanitarian problems and promote respect for human rights and fundamental freedoms".

It is clear, of course, that no machinery alone, even the most perfect, can be adequate for this purpose. The machinery of the international organization will be effective insurance against war and the threat of war only as there is a determined expression of the will of all peace-loving peoples that the world organization must work this time and will be given the support to make it work.

As President Roosevelt has said: "The peace structure which we are building must depend on foundations that go deep into the soil of men's faith and men's hearts—otherwise it is worthless. Only the unflagging will of men can preserve it."

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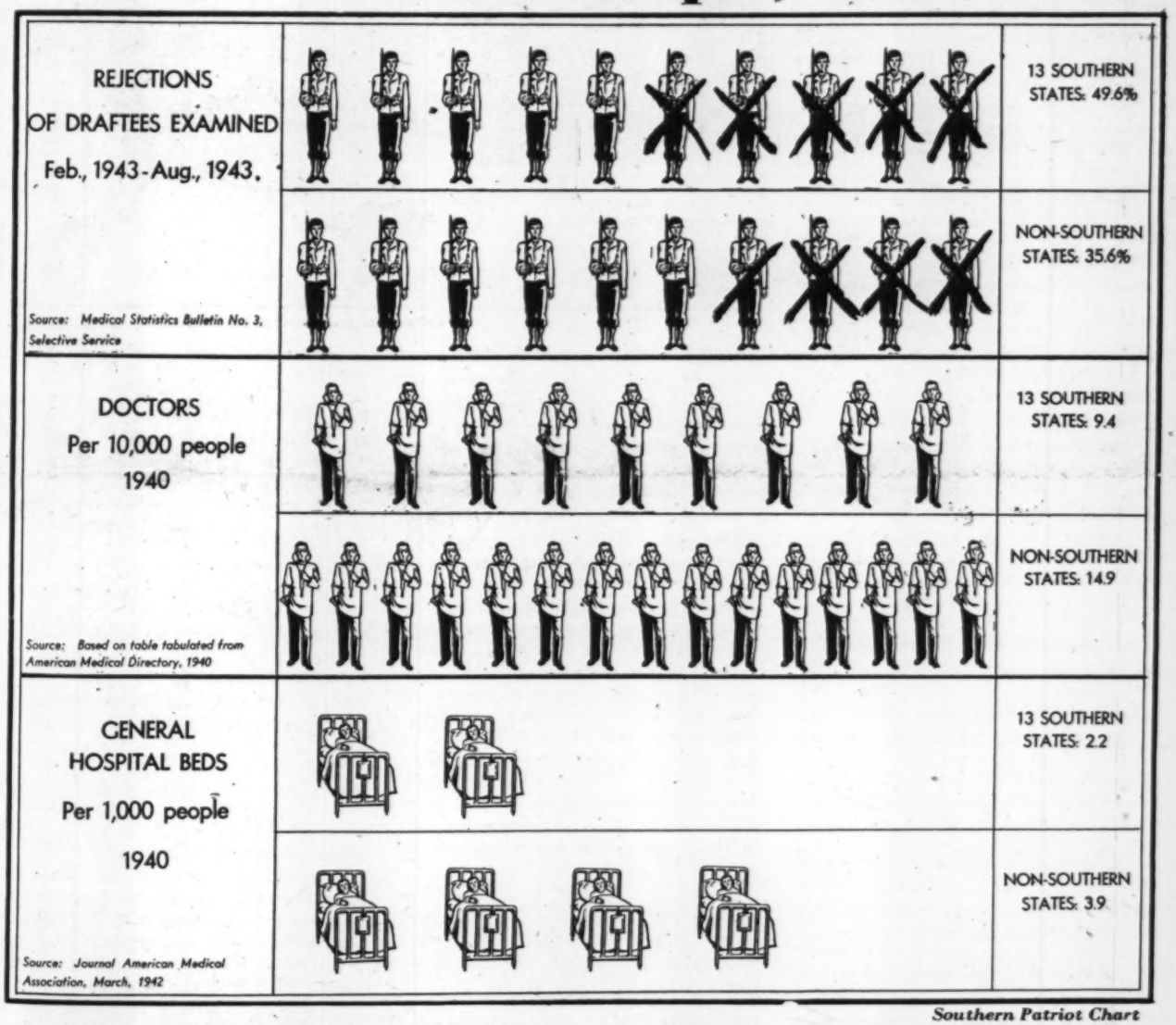
Good Health Issue

The Southern PATRIOT

Volume 3 | Nashville, Tennessee, May, 1945 | No. 5

This is the South's Case History: Poor People, Poor Health


REJECTIONS OF DRAFTEES EXAMINED Feb., 1943 - Aug., 1943.
13 SOUTHERN STATES: 49.6%
NON-SOUTHERN STATES: 35.6%
Source: Medical Statistics Bulletin No. 3, Selective Service
DOCTORS Per 10,000 people 1940
13 SOUTHERN STATES: 9.4
NON-SOUTHERN STATES: 14.9
Source: Based on table tabulated from American Medical Directory, 1940
GENERAL HOSPITAL BEDS Per 1,000 people 1940
13 SOUTHERN STATES: 2.2
NON-SOUTHERN STATES: 3.9
Source: Journal American Medical Association, March, 1942

Southern Patriot Chart

These charts tell only part of a sad and shocking story—a story of sickness and bad health the South and the nation can ill afford.

This issue of the Southern Patriot is devoted to a study of health in the South. We present first the symptoms—the facts and figures of our state of health; next, a diagnosis—a picture of the poverty that lies behind our illness; and then a prescription, based on the studies of Senator Pepper's Committee on Wartime Health and Education, and the North Carolina Governor's Commission on Hospital and Medical Care.

A happy and prosperous South depends in the very first instance on a healthy people.

We must not forget that this problem must be studied, tackled and solved if the people of our region are to play their rightful part in building a new South and a peaceful world.

How Sick is the South?

One of every two Southern youth—in the prime of life—is unable to meet the minimum physical and mental requirements for military service. While the rest of the nation furnished 65 eligible soldiers from every 100 men examined, the Southern states averaged only 49.6, a 40% increase of 4-Fers in the South!

These figures, released by Selective Service, and depicted state by state in the accompanying map, point accusingly to the health standards of the entire Southern people.

Many of the diseases which disqualify our young men as soldiers account, too, for the unusually high death rates in the South.

Tuberculosis, for example, caused 45.9 of 100,000 deaths in the nation as a whole in 1940, but in the Southeast, the figure was 56 deaths and in the Southwest, 63.1. There were 110 counties, or 17.8% of the counties in the Southeast, which had 70 or more tuberculosis deaths per 100,000. Every state in the region had 3 or more of these counties and of the 110 counties in the region, Tennessee had 51.

The death rates for influenza and pneumonia were 70.3 per 100,000 for the nation, and 90 in the nation's warmest climate, the Southeast.

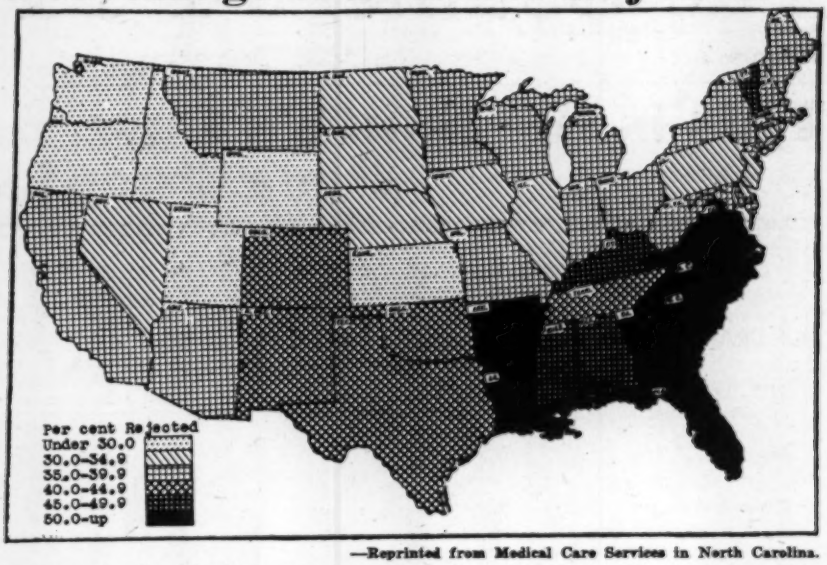
Pellagra, a disease caused usually by lack of proper food, was responsible for 1.6 deaths per 100,000 in the nation in 1940, but in the Southeast the rate was 400% higher, or 6.5. In 35 counties, there were pellagra mortality rates of 20 or higher per 100,000, and this includes over 10% of the counties in Georgia.

Venereal disease, one of the most important causes for rejection of draftees, shows perhaps the sharpest contrast between the South and the nation. Syphilis accounted for 9.4 of every 100 men rejected before draft boards and induction centers throughout the country; but in the thirteen Southern states, 16.1 of these 100 men were rejected because of syphilis. This disease was especially prevalent among Negro youth, but not exclusively by any means. Eleven of the thirteen Southern states had higher syphilis rejection rates among white youth alone than the national average for white youth.

Syphilis mortality rates in parts of the Southeast are dangerously high. In 12.3% of the counties in the region, there were death rates of 30 or more per 100,000, compared to the national average in 1940 of 14.4.

Malaria, which caused only 1.1 of 100,000 deaths in the United States accounted for 4.5 in the Southeast.

Percentage of Draftees Rejected



—Reprinted from Medical Care Services in North Carolina.

These mortality rates alone are frightening; but they do not begin to reveal the overall effect of poor health on the South. For example, the presence of malaria, which in 1937 was estimated to infect annually more than two million people, is estimated to have reduced the industrial output of the South by one-third.

One of the most striking examples of the effect of malaria on industry was revealed by the Public Health Service in studies among employees of a cotton mill in eastern North Carolina. Before the attempts to control malaria, the records of the mill one month showed 66 looms were idle as a result of ill health. After completion of control work, no looms were idle for that reason. Before control work, 238,046 pounds of cloth were manufactured in one month. After completion of the work, production rose to 316,804 pounds in one month—an increase of 33 1/3 per cent.

Control work of this sort, however, is but an isolated phenomenon. In fact, in wide areas of the South, even the most elementary health and medical facilities and personnel are lacking.

In fifteen counties in the South— counties with a population of 3,000 or over, there were in 1944 no active physicians whatever. In fifteen more Southern counties, in the same year, there were over 10,000 people per active physician. In 78 counties, there were 5,000 to 10,000 people per doctor.

The seriousness of these figures can be seen if one realizes that the minimum ratio for safety is one doctor per 1,000 population. In 1940, there was a national ratio of 1.25 doctors per 1,000 population.

Yet, in 1944, 63.4% of the counties in South Carolina had over 3,000 people per active physician; 44.8% of Florida counties; 40% in Virginia; 39.2% in Georgia, and 38.8% in Alabama.

This drastic situation was aggravated by the national shortage of doctors during wartime. But conditions were little better in 1940, when there were only 9.4 doctors per 10,000 people in the Southern states compared to 14.9 doctors in the rest of the nation.

A special shortage exists with regard to Negro doctors. In the state of Mississippi, for example, there were only 58 Negro doctors in 1942 to serve a Negro population of well over one million. In the South as a whole, there were 4,913 Negroes per Negro doctor in 1942. And there has been a 12.1% drop in the ten-year period 1932-42 in the number of Negro doctors in the South.

Another special physician shortage is in the rural areas. In North Carolina, for example, only 31% of the doctors are in rural areas, where 73% of the people live. Here, too, there has been a serious decline in the past few years.

A similarly serious shortage exists with regard to dentists and nurses. In 1940, there were 27.3 male dentists per 100,000 people in the Southern states, compared to an average of 64.1 in the rest of the country. In the same year, there were over twice as many trained nurses and student nurses per 100,000 population in the non-Southern states as in the Southern states: 156 in the South and an average of 315.8 outside the South.

The Symptoms . . .

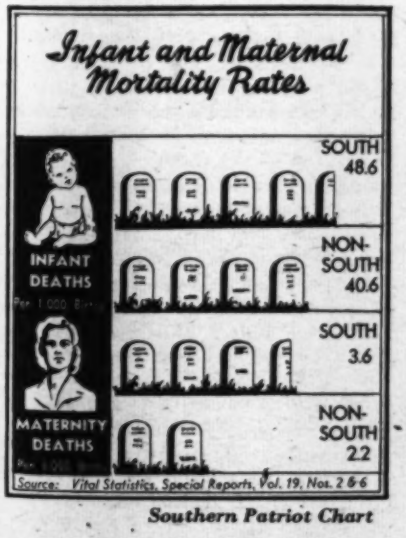
Unnecessary death, misery and ill health are shown in their clearest and grimmest form in the infant and maternal mortality rates in the South.

That good medical care could have prevented a substantial percentage of the South's infant deaths and stillbirths is proved by the fact that in 1940 the number of infant deaths and stillbirths per thousand in South Carolina (110) was more than twice the number in the states of Washington (51), Connecticut (53), Oregon (53), and Minnesota (54).

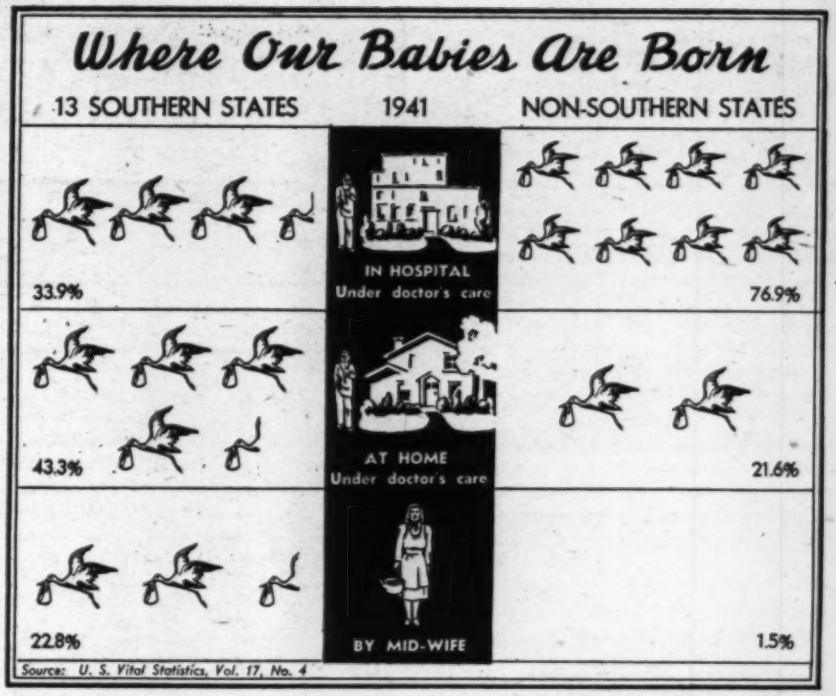
The reason that eight of the nine states with the highest maternal death rate were Southern states is easily understood by a glance at the chart on the right, which indicates that only three of every ten Southern mothers are able to have the protection they need in childbirth, compared to almost eight out of ten outside the South.

Lack of hospital facilities is probably the most important factor, not only behind the high child and maternal mortality rates but underlying the whole Southern health picture. For although the South has 29.5% of the nation's population, it has only 18.8% of its general hospital beds, 18.1% of its tuberculosis hospital beds, and 18.3% of its mental hospital beds.

The ten states with least number of hospital beds per 10,000 people in 1940 were all Southern. Mississippi is at the bottom with fifteen beds per 10,000, compared to Nevada with more than four times that amount (62). The minimum necessity is considered to be four beds per 1000 people, but the Southern states had an average of only 2.2 beds in 1940. No Southern state was up to the minimum, although Louisiana, Florida and Virginia were considerably ahead of the rest of the South, with 3.7, 3.3, and 3.1, respectively.



Southern Patriot Chart



Southern Patriot Chart

The shortage of hospital beds available for care of Negroes who are sick or injured is particularly acute. Note the following figures:

Arkansas: 0.9 beds per thousand for Negroes; 1.4 beds per thousand for entire population.

Mississippi: 0:7 beds per thousand for Negroes; 1.3 beds per thousand for entire population.

South Carolina: 0.9 beds per thousand for Negroes; 1.7 beds per thousand for entire population.

This was reflected in the mortality rate of Negro mothers, which in 1942 was 5.5 per thousand live births, compared to approximately 2 for white mothers.

Another vital health facility is the local health department. Yet 38.9% of the counties in the South (529 counties) are not served by a local health unit. Of the 832 counties with health departments, most are inadequately staffed. The minimum number of personnel for efficient operation is four per 10,000 population, but 66 of the 67 counties in Alabama, for example, had in their health departments three or less employees per 10,000 people.

Several other factors need to be mentioned to complete the Southern health picture. One is the sanitation needs of the South. According to a study of sanitation facilities in the Public Health Reports, of 5½ million rural homes in the Southern states, less than three million have a water supply within fifty feet; 657,799 have no toilet or privy; and 4 million dwelling units have only outside toilet or privy.

From the same source, we find that of the 4,933 incorporated communities in the South, 1,928 or 39½% need a public water supply; 47.2% need a sewage system with treatment; 36.8½ need extensions to existing sewer systems and 15% need new sewage treatment plants.

The Washington Chapter of the Southern Conference for Human Welfare held a special dinner meeting to discuss "The South's Health Problems." Speakers and guests included Dr. Joseph W. Mountin, U. S. Public Health Service; Mr. R. W. Hudgens, Associate Administrator, Farm Security Administration; Dr. Paul B. Cornely, Howard University; Dr. Martha Elliott, Children's Bureau; Mr. I. S. Falk, Social Security Board; Dr. R. C. Williams, Assistant Surgeon General, U. S. Public Health Service; Dr. F. D. Mott, Chief Medical Office, Farm Security Administration and Office of Labor; Dr. Charles Drew, Freedman's Hospital, and Mr. John Jacobson, Senate Sub-Committee on Wartime Health and Education. Their remarks were most helpful in the preparation of this special health edition of the SOUTHERN PATRIOT.

One Fourth of Our People . . .

(From a Speech by Dr. Paul B. Cornely, Howard University, Washington, D. C.)

There is no such thing as Negro health—just as there is no Chinese or Irish health. Rather, Negro health problems cannot be isolated from the health problems of the whole community. Negro health conditions affect the welfare of the community and the nation as a whole, and thus, if for no other reason, are the responsibility of the entire nation. This is easy to prove: the sick Negro who cannot work in the groves of Florida curtails to some extent the supply of oranges for the breakfast of a white worker in Connecticut; the physically defective Negro who cannot be accepted in the armed forces affects adversely the successful defense of our country.

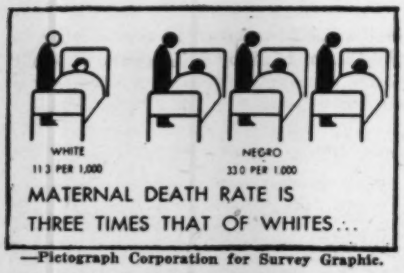
Here Negro health problems, their causes and suggested solutions, are discussed in terms of the total Negro population, since the problems of the almost 10 million Negroes in the South, while more acute, are not different from those of the group as a whole.

Facts of Negro Life and Death

The general Negro mortality rate is 30 to 40 per cent higher than the rate for whites.

Negro life expectancy is 10 to 12 years shorter than that of the white group.

Between the ages of 20 and 24, three times as many Negro as white women die.



—Pictograph Corporation for Survey Graphic.

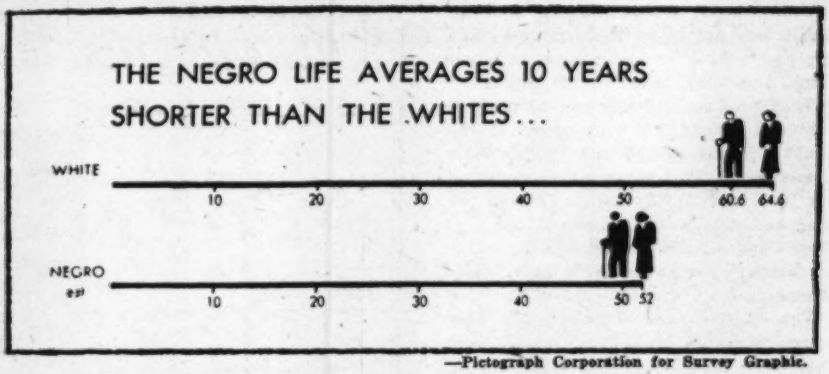
In 1942, three times as many Negroes as whites died of tuberculosis. And in certain cities and age groups, this disproportion has reached levels of 8 to 1.

Venereal disease is from 10 to 12 times more prevalent in Negro than in young white men.

In spite of the fact that utilization of sulfa drugs has cut fatalities tremendously, pneumonia and influenza still kill, proportionately, twice as many Negroes as whites.

Causes

Three major factors determine to a great extent the health status of any group: socio-economic level, educational level, and availability of health and medical care. In each of these categories, Negroes are literally "at the bottom of the pile."



—Pictograph Corporation for Survey Graphic.

The low economic stratum of the Negro is well illustrated by his per capita income, the housing facilities available to him, and the nutritional level at which he must exist. In the field of housing, for instance, the National Health Survey in 1935-36 found that in the South 21.2% of Negro households had more than 1½ persons per room as compared to 8.3% of white households in that area.

The low educational level of the Negro is shown in the fact that up to January 1, 1945, 32% of Negro rejectees examined under selective service were disqualified because of educational deficiency. It is not difficult to explain this educational deficiency when it is recalled that in 1935-36 ten Southern states spent almost $50 for each white child as compared to $17 for each Negro. In states like Mississippi and Georgia, a Negro child was allotted $9 for a year's education as compared to $45 for a white youngster. The resulting low educational level is an effective deterrent in the development of interest, awareness, and alertness in matters which pertain to health, in terms of himself and his community.

The third factor, lack of health and medical facilities, can be illustrated in many ways. The availability of Negro physicians to serve the Negro population is extremely important. Yet in the decade 1932-42, the number of Negro physicians in the nation as a whole decreased 5%, in the South 12%, while the total number of physicians in the nation increased 12%. The South with ten million Negroes had few more than 2,000 Negro physicians. Mississippi employed 5 Negro public health nurses for a Negro population of one million. Negro dentists were even scarcer.

General hospital beds are woefully lacking in the South. Hospital bed facilities for specific diseases are similarly inadequate. Finally, care available to Negro mothers and infants leaves much to be desired. In 1942, 45.7% of Negro live births were delivered by midwives. The situation in some states was even worse, as seen in the following table, which shows percentages of births attended by midwives:

	White	Negro
South Carolina	5.4	77.2
Mississippi	4.9	80.0
Arkansas	4.6	71.6
Georgia	6.7	69.5

Problems Can Be Solved

In any attempt to solve the problems of Negro health, it should be borne in mind that they are merely exaggerations of the picture of the community as a whole. Thus any program which meets the needs of the community needs only to be intensified or extended to meet the problems of Negro health. However, certain specific suggestions can be made:

1. Abandonment of the quota system in allocating health facilities to the Negro. It seems elemental that health services must be furnished in relation to the needs of any group, rather than on a basis of its ratio in the population. Similarly, the "second-hand" approach—the feeling that Negroes can get along with less than whites, and therefore can use to advantage what has been found inadequate for the white community.

2. Development of a generalized health program, which adds to its emphasis on specific diseases an interest in nutrition, sanitation, protection in industry and on the farm.

3. Extension of educational opportunity to young Negroes, whereby they may secure training in medicine, dentistry, nursing, and allied fields.

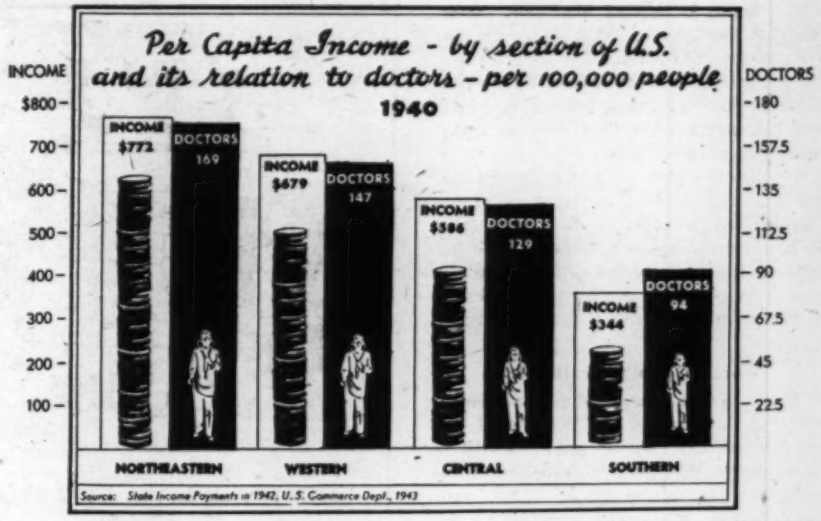
4. Development of a hospitalization program, especially in the South. If the Hill-Burton Bill, S. 191, is passed (see page 7), it is hoped that the new facilities will be developed in terms of the needs of the community as a whole.

5. A compulsory medical care program, whether financed by government or private funds, could ease the impact of illness on all individuals.

The Diagnosis . . .

The poverty of the South is the basic cause of the ill health of the South. The Southern people are sick because they are poor—poorly fed, poorly clad, poorly housed—unable to afford medical care, their poor communities unable to afford adequate medical facilities.

Per capita income, the clearest index of a region's wealth, correlates with surprising accuracy with almost any selected index of a region's health. The accompanying chart shows a comparison of per capita income with the number of doctors per 100,000 population for the various regions of the United States. The same almost exact relationship would be reflected if the ratio of hospital beds to population had been chosen—for wealth means health, as surely as health means wealth.



Southern Patriot Chart

Poorly Fed and Housed

A Department of Agriculture study proves in cold statistics what Southerners know well from experience—that the overwhelming number of Southern people have less healthful diets than their fellow countrymen, because they are in lower income groups. The Southern diets were particularly deficient in Vitamins A, B, C and G.

The homes of the Southern people, too, reflect their poverty. The 1940 U. S. Census of Housing which classifies the average value of occupied dwelling units, shows that the average value of a home in the Southern states is $1,363 compared to $2,503 in the nation as a whole. Of the ten states with poorest homes, nine are Southern. The farm homes in the South are even poorer, averaging in value only $644. One of the main reasons many homes are valued so low, of course, is because they have dangerously inadequate sanitation systems, breeders of disease.

Yet, ironically enough, the medical attention needed most by the Southern people, whose poor living conditions mark them as targets of disease, is not available to them. They cannot afford a doctor's service, nor can many doctors afford to practice in their poor communities. Why the acute shortage of doctors in the South? Because doctors are attracted to those places where:

1) There are modern hospital facilities;

2) there are assurances of income;

3) There are opportunities for research.

The lack of these facilities especially in the largely agricultural South make rural practice particularly unattractive to young physicians. Yet it is in the rural areas that they are most crucially needed.

Why So Few Hospitals?

The lack of hospitals and diagnostic facilities is probably the most important factor in keeping doctors away from rural practice. In fact, the presence of hospital facilities alone, independent of such factors as community wealth and size of population, appears to attract physicians. This is suggested by a United States Public Health Service study which shows that among counties with per capita income of less than $300, those with no general hospital beds had 60 per cent fewer doctors in proportion to population than did those with 250 or more general hospital beds.

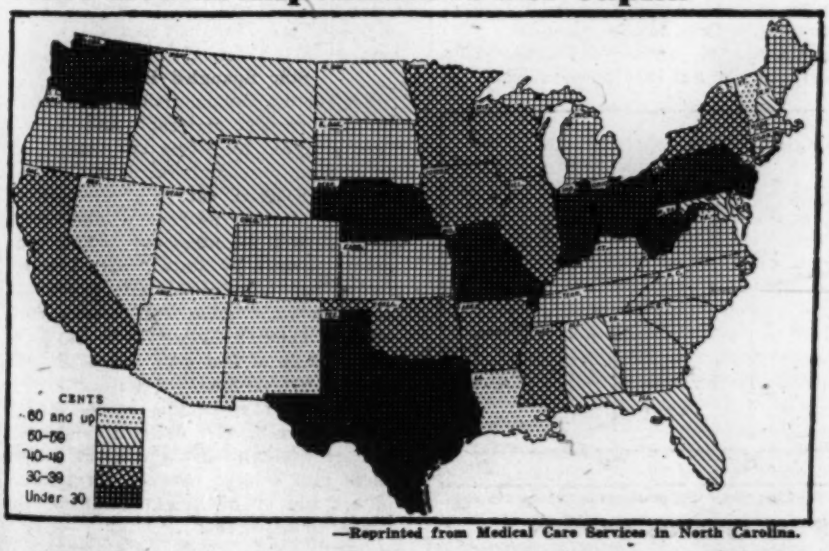
The absence of modern hospitals in so many Southern areas is again the result of the low income of its people. Rural areas lack the corporate and individual wealth that provides ample tax funds, generous endowments and full payment of fees and charges.

As seen in the chart below, the South's per capita health expenditure is as great as that of the rest of the nation. However, this per capita allotment is totally inadequate to meet the region's desperate needs, and the states cannot allocate more money. The citizens of those states simply do not have the wealth.

The South's wealth through the years has been sucked out of the region to outside financial interests. In 1935, for example, the assessed value of taxable property in the South averaged only $463 per person, while in nine Northeastern states, it amounted to $1370.

It is thus clear that the South is unable to meet its health problems alone and without federal assistance.

State Health Expenditures Per Capita

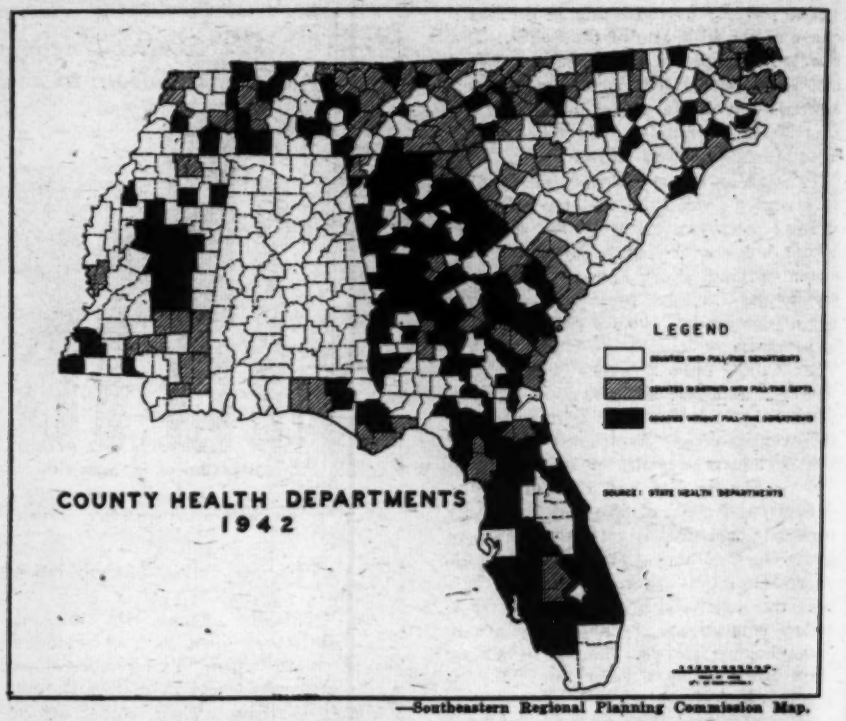


—Reprinted from Medical Care Services in North Carolina.

The Patient is Improving . . .

The South is getting healthier. Over the past few years, great progress has been made in lowering the death rates for many diseases, in developing a wide public health program and in bringing medical care for the first time to many thousands of people.

Perhaps the greatest stride forward in the past few decades is the work of increased and expanded public health units in Southern states and counties. In 1942, 66.9% of the counties in the Southeast were covered. A map prepared just a few years ago would have been far blacker.



—Southeastern Regional Planning Commission Map.

Work of Public Health Men

These public health departments do varying work in the different states, but in general, the role of public health is to organize the medical forces of a region for the conservation of the people's health. The program of health departments includes sanitation of water supplies and sewage disposal, milk inspection, immunization, physical examinations in public schools, maternal and child health clinics, nutritional clinics, venereal disease control, acute communicable disease control, malaria control, tuberculosis control, supervision of hotels and restaurants, prevention and care of blindness, dental services, laboratory service and health education.

Federal aid financed much of this activity. 36.8% of the almost thirteen million dollars spent in the seven Southeastern states in 1940-41 was from the national treasury, allotted through the Social Security Act.

Medical Care For the Farmers

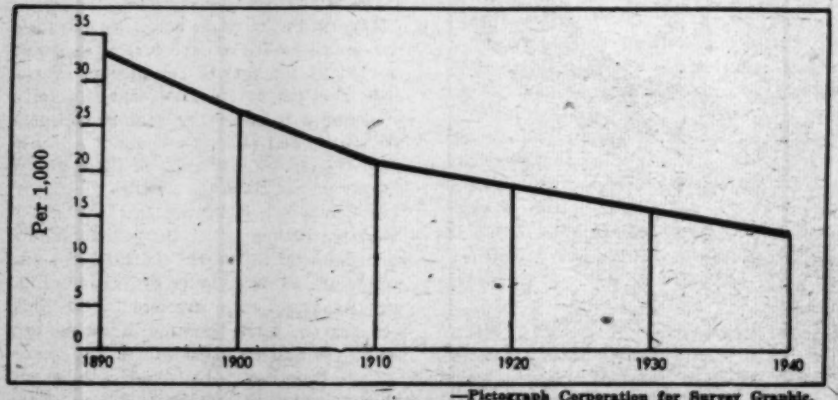
Funds from another Federal agency, the Farm Security Administration, have been used to set up a health service program of great significance, especially in Southern rural areas. When the F.S.A. was established in 1936 in the effort to rehabilitate low income farm families, it immediately became clear that the ill health of these rural people must be tackled as an initial step. It also soon became evident that granting of individual loans to pay for emergency sickness bills was insufficient, for like the risk of fire, the risk of illness could not be effectively budgeted on an individual basis. So a series of group health plans were developed which now cover F.S.A. borrowers in one third of the counties in the United States, and in 1943 included over 360,000 rural Southerners.

Under these medical service plans, organized under a basic working agreement with state and local medical associations, a farm family voluntarily pays an annual fee to cover emergency medical and hospital care under a physician of their own choice. The plans vary from county to county in services offered and prepayment fees, but the latter are usually based on the size of family, average income and care provided, and range from $15 or $20 per family in low income areas to as much as $40 or more in high income areas. Services offered vary according to need, ability of the group to pay, and facilities already available, but they usually include physician's services, both home and office calls, obstetrical care, emergency surgery and hospitalization and in some cases, dental care. In 1942, 55.3% of all eligible F.S.A. families had taken advantage of the opportunity to join plans.

Star Spangled Babies

Yet another valuable federal project is the Emergency Maternal and Infant Care program for wives and infants of servicemen, providing free medical, nursing and hospital care for prospective mothers during pregnancy and child birth, as well as infant care. This program, operated by State Health Departments, has been of especial benefit in Southern rural areas where such care was not generally available in the past, and by July of last year had been used by over 100,000 Southern mothers.

These are some of the reasons Southern death rates have dropped so sharply and gratifyingly—but the great differences still evident between these rates in and out of the South point to still urgent unmet needs.



—Pictograph Corporation for Survey Graphic.

NEGRO DEATH RATE IS GOING DOWN

Some Prescriptions . . .

That the Southern states alone cannot afford the comprehensive program necessary to restore good health to their people is universally recognized. If education of the child is the federal government's responsibility, then surely too is the health of the child. But what kind of federal aid is needed?

The South's two leading senators, farsighted Claude Pepper of Florida and Lister Hill of Alabama, have both given much study to this problem, Senator Pepper as chairman of the Senate's Sub-Committee on Wartime Health and Education, and Senator Hill as author of the Hospital Construction Act. Both have concluded that the first need is a hospital and health center planning and construction program to cover the whole nation.

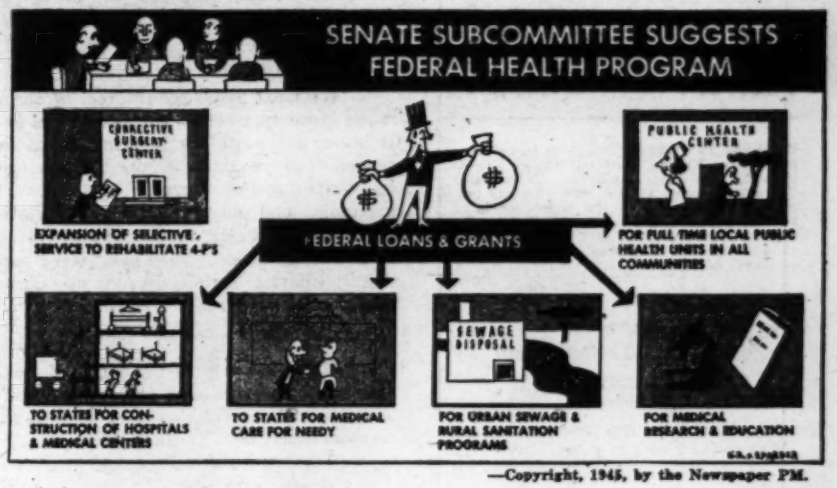
The Pepper Committee has proposed networks of medical facilities on a regional or state basis, to make high quality medical care available to every citizen regardless of where he may live. This recommendation has been embodied in a bill, S-191, introduced jointly by Senators Hill and Burton.

The Hill-Burton Bill authorizes federal aid to the States for three purposes: 1) to assist the states in making a careful survey of the hospitals and health facilities in the state to determine what is needed to bring health services to all; 3) to assist states, counties, cities and communities to provide for themselves modern hospital and health centers, and 3) to assist the states to correlate and integrate their hospital and public health services and to plan additional facilities when and where needed.

The bill provides an initial $5,000,000 for planning and $100,000,000 for building new facilities, with additional appropriations to be made available from year to year.

The Pepper Committee, on the basis of its comprehensive survey of the nation's health needs, has outlined a model plan for such state health services—"A medical center which combines and coordinates the three major aspects of modern medical care: the preventative, the diagnostic and the therapeutic service". It proposes the development of a coordinated network of small neighborhood and community health centers, rural and district hospitals, around a large base hospital. . .

But facilities alone, vital though they are, are not enough. The people must be able to afford to use them. Authoritative and conservative estimates show that the average cost of good medical care today is about $150 per family per year. That would be 5% of the income of a family that receives $3,000 a year.


SENATE SUBCOMMITTEE SUGGESTS
FEDERAL HEALTH PROGRAM
CORRECTIVE SURGERY CENTER
EXPANSION OF SELECTIVE SERVICE TO REHABILITATE 4-F'S
FEDERAL LOANS & GRANTS
PUBLIC HEALTH CENTER
FOR FULL TIME LOCAL PUBLIC HEALTH UNITS IN ALL COMMUNITIES
TO STATES FOR CONSTRUCTION OF HOSPITALS & MEDICAL CENTERS
TO STATES FOR MEDICAL CARE FOR NEEDY
SEWAGE DISPOSAL
FOR URBAN SEWAGE & RURAL SANITATION PROGRAMS
FOR MEDICAL RESEARCH & EDUCATION

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Seventy percent of the families in the United States, however, have incomes of less than $3,000, and fifty percent have less than $2,000. Even if we leave out of consideration entirely the fact that many families have need of medical services costing much more than the average figure of $150 a year, it is evident that a majority of the population cannot meet the costs of proper medical attention.

Clearly, the only solution of this problem is a method of payment by which the risks may be distributed among a substantial proportion of the people and the costs of illness over a long period of time. There is considerable agreement that some method of prepayment is the answer, but considerable disagreement over whether it should be voluntary or compulsory. The Pepper Committee is still studying the question, and to date, has recommended only certain conditions that any such program must meet.

They recommend, first, that the medical care given must be complete care—that is, including hospitalization, general medical care, including all modern diagnostic and preventive services and dental care. Insurance against so-called catastrophic illness, or a portion of the medical bill, is not enough. Second, the cost of the service must be low enough so that most of the people can be included in the system, which will require governmental subsidies.

Many feel that an extension of the social security benefits to include complete medical care is the answer. This program of cradle to the grave security as proposed in the Murray-Wagner-Dingell Bill introduced in the last session of Congress provides complete protection—medical and hospital care as well as maternity benefits, old age benefits, and unemployment compensation for virtually the entire population. It is financed through employer and employee payroll tax of 6% each on wages up to $3,000 per year. A new and improved bill, to be introduced soon in this session of Congress, is expected to reduce the tax to 4% each. This type of program, endorsed by all the labor organizations and many groups in the medical field, is similar to Britain's postwar health insurance program and according to a poll of the National Opinion Research Center is favored by 68% of the American people.

Labor Speaks

—from testimony before the Pepper Committee

William Green

"The American Federation of Labor believes the Murray-Wagner-Dingell Bill is a carefully considered plan to meet just the deficiencies which the inquiries of this committee have revealed. It is our firm conviction that anything short of the comprehensive program provided for in this measure will condemn milions of our people to the undeserved suffering and want attendant on illness and will contribute to the insecurity of our national well-being."

Philip Murray

"In the face of the demonstrated need and the rising demand for medical care, I want here to speak in favor of a raising of our sights, and a reconsideration of our situation.

"I can assure you that the 5,000,000 organized workers in the Congress of Industrial Organizations whom I represent are eager to cooperate in a program for better medical care for all citizens of the country."